

OCT 07 2005

Atty Docket No. 021989-000411US

PTO FAX NO.: 1-571-273-8300

ATTENTION:

Group Art Unit 1648

**OFFICIAL COMMUNICATION
FOR THE ATTENTION OF
GROUP ART UNIT 1648**

CERTIFICATION OF FACSIMILE TRANSMISSION

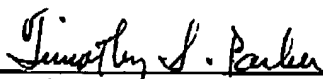
I hereby certify that the following documents in re Application of David S. Burt, et al., Application No. 10/771,737, filed February 3, 2004 for PROTEOSOME INFLUENZA VACCINE are being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Documents Attached

1. Form PTO/SB/21
2. Request For Withdrawal As Attorney Or Agent And Change Of Correspondence Address

Number of pages being transmitted, including this page: 3

Dated: October 7, 2005


Timothy S. Parker

**PLEASE CONFIRM RECEIPT OF THIS PAPER BY
RETURN FACSIMILE AT (858) 350-6111**

TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, CA 94111-3834
Telephone: 858-350-6100
Fax: 415-576-0300
60603250 v1

PTO/SB/21 (08-04)

| | | | |
|---|----------------------|------------------------|-----------------|
| TRANSMITTAL FORM (to be used for all correspondence after initial filing) | Application Number | 10/771,737 | |
| | Filing Date | February 3, 2004 | |
| | First Named Inventor | Burt, David S. | |
| | Art Unit | 1648 | |
| | Examiner Name | | |
| Total Number of Pages in This Submission | 2 | Attorney Docket Number | 021989-000411US |

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| ENCLOSURES (Check all that apply) | | |
|--|--|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Withdrawal as Attorney or Agent and Change of Correspondence Address |
| Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. | | |
| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | |
| Firm Name | Townsend and Townsend and Crew LLP | |
| Signature | <i>Scott E. McPherson</i> | |
| Printed name | Scott E. McPherson | |
| Date | October 7, 2005 | Reg. No. 53,307 |

| CERTIFICATE OF TRANSMISSION/MAILING | | | |
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| I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, Fax No. 1-571-273-8300 on October 7, 2005. | | | |
| Signature | <i>Timothy S. Parker</i> | | |
| Typed or printed name | Timothy S. Parker | Date | October 7, 2005 |

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PTO/SB/83 (04-05)

**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS**

| | |
|------------------------|------------------|
| Application Number | 10/771,737 |
| Filing Date | February 3, 2004 |
| First Named Inventor | BURT, David S. |
| Art Unit | 1648 |
| Examiner Name | |
| Attorney Docket Number | 021989-000411US |

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**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ all the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ all the attorneys/agents associated with Customer Number **20350**

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: Client requests to transfer matter

CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☐ Change the correspondence address and direct all future correspondence to:
- ☐ The address associated with Customer Number:

OR


☒ Firm or Individual Name Seed Intellectual Property Law Group PLLC

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Signature 

Name Scott E. McPherson

Registration No. 53,307

Date October 7, 2005

Telephone No. 858-350-8100

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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